

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)								SERIAL NO. (D) 544D7	FILING DATE				
								APPLICANT(S)					
CLAIMS													
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
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48							98						
49							99						
50							100						
TOTAL IND.			↓	↑	↓		TOTAL IND.			↓			
TOTAL DEP.			←	↑	←	←	TOTAL DEP.			↓			↓
TOTAL CLAIMS			↑	↑	↑		TOTAL CLAIMS			↑			↑